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	l	PAIEN	IT APPL	ICATI. Effecti	ON FEE	COR	D			Dockern				
	Effective December 29, 1999										091	4	1464	3
	L		CLAIMS AS FILED - PART I (Column 1) (Column 2)								L ENTIT	γ	ОТН	ER THAN
	Ľ	FOR			ER FILE		NUMBER EXTRA			TYP			R SMAI	LL ENTITY
	BASIC FEE					. ,		\dashv	RATE			RATE		
	TOTAL CLAIMS / / mi				minu	ıs 20≂	•		┨	-	345.0	<u>"</u> 0	R	690.00
	ŀ	IDEPENDENT	Uf minus 3 :		us 3 =	. /		\dashv	X\$ 9=		_ 0	R X\$18=	=	
	MULTIPLE DEPENDENT CLAIM PRESENT							 -	-	X39=		_	X78=	78-
ı	* If the difference in column 4 in 1									+130=			+260=	
1			less than zero, enter "0" in column 2				TOTAL	1-			100			
ı		CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)												R THAN
	4	i v			olumn 2) IIGHEST	(Column 3	3)	SMALL	ENTITY	OF	SMALI	LENTITY		
	AMENDMENT	Total	AF	AINING TER DMENT	0	PR	NUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
		Independent	1. 19	7	Minus	<u> </u>	20,	=	11	X\$ 9=		OF	X\$18=	
			1 7	N OF MI	Minus	···	4	= /]	X39=	†	7/	-	+-/
T		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							┨╏	400	 	A OR	A/0=	 /
									L	+130=	/	OR		
L	_(Q · 20 · 02 (Column 1) (Column 2) (Column 2)								DDIT. FEE		OR	ADDIT. FE	/
2	כ	1	CLA REMA		• • • • • • • • • • • • • • • • • • • •	H	GHEST UMBER	(Column 3)	'nг		ADDI-	7		_
AMENDMENT B		Total	AFT AMEND	MENT		PRE	VIOUSLY ND FOR	PRESENT	╽╽	RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
		Independent	1. 2	-	Minus Minus	1:0	<u> </u>	= 0		X\$ 9=		OR	X\$18=)
4		FIRST PRESE	ENTATION			PENDE	AT CLAIM	= ()	łΓ	X39≈	/	OR	X78=	
						LITE	IN CLAIM		1	+130=		OR	+260=	/
										TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
0	1	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT (Г		REMAIN AFTE AMENDA	R I		PRE	MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
S	H	Total	•	N	linus	••		=		X\$ 9= ·			VC40	FEE
AB	⊩	ndependent	NTATION		linus	•••		z	-			OR	X\$18=	
_	<u>L</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								X39=		OR	X78=	
*If the entry in column 1 is less than the entry in column 2, write "0" in column 3. *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **TOTAL ADDIT. FEE												OR	+260=	
	Th	ne "Highest Nun e "Highest Num!	nber Previou ber Previou	usly Paid sly Paid F	For IN THIS	S SPACE	is less than dent) is the h	3, enter "3."	ADI	VIT FEE		OR A		
ORM	A P	TO-875		<u>. ·</u>			, .0 010 11		ivuna	nı mə appı	opriate box	t in colu	mn 1.	ľ
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